

EXHIBIT 2

DATE ISSUED: December 6, 1979

NOTICE OF GRANT AWARD

DEC 14 1979

GRANT NUMBER:

5 R01 GM24263-03 GEN

TOTAL PROJECT PERIOD:

From 01/01/78 Through 12/31/80

TYPE OF AWARD:

RESEARCH

AUTHORIZED BY:

42 USC 241 42 CFR 59

AWARDED BY:

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Title of Project or Area of Training

GENETIC TRANSFER IN MAMMALIAN SOMATIC CELLS

Grantee Institution

UNIVERSITY OF PENNSYLVANIA
3451 WALNUT STREET
FRANKLIN BUILDING/16
PHILADELPHIA, PA 19104

Principal Investigator/Program Director/Awardee

GOODGAL, SOL H PHD
UNIVERSITY OF PENNSYLVANIA
DEPARTMENT OF MICROBIOLOGY
PHILADELPHIA, PA 19104

APPROVED BUDGET

FOR BUDGET PERIOD 01/01/80 Through 12/31/80

Salaries and Wages \$ 20,334
Fringe Benefits 5,715
Total Personnel Costs \$ 26,049

Consultant Costs
Equipment 1,000
Supplies 9,000
Travel - Domestic 400
- Foreign

Patient Care - Inpatient
- Outpatient

Alterations and Renovations

Contractual or Third Party Costs

Other 6,367

Trainee Stipends

Trainee Tuition and Fees

Trainee Travel

TOTAL DIRECT COSTS \$ 42,816

When PHS Prior Approval is required for rebudgeting, submit
request to Grants Management Official below.

REMARKS:

APPLICABLE INDIRECT COSTS WILL BE PROVIDED ON A SUMMARY NOTICE.

AWARD COMPUTATION

1. DIRECT COSTS \$ 42,816

2. INDIRECT COSTS \$ 0

(Calculated at _____ rate)

3. TOTAL \$ 42,816

4. Less Unobligated Balance From

Prior Budget Period(s) \$

5. AMOUNT OF THIS AWARD \$ 42,816

COST SHARING

CONTRIBUTION

(1) Per Inst. agreement dated

(2) Per Indiv. agreement, minimum

07/01/73

SUPPORT RECOMMENDED FOR REMAINDER OF PROJECT PERIOD*

Budget
PeriodTotal Direct Costs
(Includes Stipends)

Stipends

04

NONE

*Subject to availability of funds and satisfactory progress.

THE PROGRAM ADMINISTRATOR FOR THIS GRANT IS DR. DAVID BECK - 301/496-7175.

GRANTS MANAGEMENT SPECIALIST(S) FOR THIS GRANT: D. McNISH/B. SPINKS - 301/496-7166.

TERMS OF ACCEPTANCE: By acceptance of funds awarded under this grant, the grantee acknowledges that it will comply with terms and conditions
the following: (1) Legislation cited above; (2) Regulations cited above; (3) Provisions on or attached to this award notice and signed by the
Principal(s) named below; (4) PHS Grants Administration Manual Chapters in effect on the beginning date of the grant Budget Period; (5) PHS Grants
Policy Statement in effect on the beginning date of the grant Budget Period; (6) 45 CFR Part 74. The above order of precedence shall prevail.

Y Common Account Number

0-8423527

CRS/Entity Identification No.

1231352685A1

PHS List Number

80-GM-0149

Document Number

(08) R1GM24263A

PROGRAM OFFICIAL

Arthur E. Heming
ARTHUR E. HEMING, PH.D.
ASSOCIATE DIRECTOR FOR
PROGRAM ACTIVITIES

NAT. INST. OF GEN. MED. SCIENCES

PHS Grants Management Official

Evelyn W. Carlin
EVELYN W. CARLIN

GRANTS MANAGEMENT OFFICER
OFFICE ASSOC. DIRECTOR PROGRAM
ACTIVITIES, NIGMS